

Regional Arts Development Fund 2017-18

Project Outcome Report – Category 1

For Professional/Career Development Activities

All RADF funding recipients are required to complete and submit an outcome report to council within 8 weeks of their activity completion.

This outcome report template is for those undertaking professional/career development activities – e.g. attendance at conferences and training workshops to develop your own skills, knowledge or career.

1. ACTIVITY INFORMATION

Activity/project name	
Applicant name	
Contact phone number	
Contact email	
Financial year funding approved	
RADF funding contribution	\$
Activity start date	
Activity completion date	
Postcodes or names of locations where you undertook activity	
Brief description of activity (max. 100 words)	
Links to websites, images, video clips or other information that demonstrates project outcomes. (If you plan to send images as separate attachments, please include no more than three.)	

2. OUTCOMES

Please rate the extent to which you agree or disagree with the following statements about your experience of the professional/career development activity you undertook.

Statement	Select your response to each statement from the following scale: <ul style="list-style-type: none">• Strongly agree• Agree• Neutral• Disagree• Strongly disagree
I developed new skills and knowledge	
I explored new directions in my practice	
It took my career to the next level of professionalism	
I developed new industry networks	
I developed new audiences or markets	

3. REFLECTIONS

What do you see as the top three outcomes for you from the activity? (max. 150 words)

What were your key learnings or reflections from the activity that will inform your work in the future? (max. 200 words)

4. FINANCIAL STATEMENT

Statement of Income and Expenses

Please complete the budget template below to account for all actual costs of your activity.

EXPENDITURE	TOTAL COST of each expenditure item.	RADF	INCOME Income includes in-kind contributions and the total RADF grant you received.	TOTAL COST of each income item
Activity costs (eg conference or workshop fees)			Applicant contribution	
Travel costs to and from the activity			Other grant income	
Accommodation cost			Other contributions or in-kind support	
Other costs				
		n/a		
		n/a		
		n/a		
RADF GRANT (total of column 3)			RADF GRANT (total from column 3)	
TOTAL EXPENDITURE			TOTAL INCOME	

Your budget must be balanced (ie the totals for Expenditure and Income must be equal.)

List all receipts that relate to the spending of your RADF grant.

Receipt	Amount (whole \$ only)
Activity costs (conference or workshop fees)	<input type="checkbox"/> Attached
Travel costs to and from the activity	<input type="checkbox"/> Attached
Accommodation	<input type="checkbox"/> Attached

Please provide details in the table below of non-RADF funds contributed to the activity. This question relates to financial/cash contributions, not in-kind support.

Other grants (please itemise)	Total amount
Sponsorship, fundraising and donations (please itemise)	Total amount

Do you have any unspent RADF money? No / Yes

IF YES - have you returned the unspent RADF money?

- Yes, I have attached with this Outcome Report all documents relating to the return of unspent RADF money and copies of the documents outlining this transaction.
- No - Please contact your Council RADF Liaison Officer and inform them of the unspent RADF money. Remember that failure to do so may affect your future applications to the program.

5. SUPPORT MATERIAL

List all the support material you are including with this Outcome Report that demonstrates the success of the activity. (e.g. press clippings, event program, photographs, advertisement and written feedback)

I have digital images of the activity Yes

Where possible, please supply a CD of images with your Support Material

Support Material

6. DECLARATION BY RECIPIENT

Declaration by funding recipient:

- I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.
- I understand I may be asked to provide the Council with additional information on the funded activity.
- I understand that the Council and RADF Committee may share this outcome report with Arts Queensland as an example of good practice.

Signature Note: If you are under 18 years, your legal guardian must also sign this outcome report		Date: / /
Name in full:		

7. DECLARATION BY AUSPICE BODY (as identified in RADF Application)

- I certify that to the best of my knowledge, the financial information detailed in this report (and relevant attachments) is true and correct.
- I understand I may be asked to provide the Council with additional information on the funded activity

Signature:		Date: / /
Name of Auspice Body:		
Contact person's name in full:		
Position in group or organisation (if relevant)		